REPORT FORM

LOSS/THEFT OF PASSPORT CONTAINING U.S. VISA

	TODAY'S DATE:	/		/
PERSONAL INFORMATION		(Month)	(Date)	(Year)
FULL NAME (as shown in passport)				
OTHER NAMES USED (maiden, pet name, etc):				
DATE OF BIRTH://PLACE O	F BIRTH:			
MAILING ADDRESS:				<u>.</u>
TELEPHONE NUMBER:				
SPOUSE'S NAME (including maiden name):				
FATHER'S FULL NAME:				
MOTHER'S FULL NAME (including maiden name):				
LOST PASSPORT INFORMATION				
LOST PASSPORT NUMBER:	ISSUING COUNTR	Y:		
ISSUANCE DATE://(Day) (Year)	EXPIRATION DATE:	/ (Month) (I	/_ Day)	(Year)
U.S. VISA INFORMATION				
DATE OF VISA ISSUANCE://(Year)	_EXPIRATION DATE	E:/(Month) (I	/	(Year)
CITY WHERE VISA ISSUED:	_ LAST VISIT TO TH	IE U.S. (Month)	(Day)	_/(Year)
VISA CATEGORY (circle one of the following): B-1; B-2;	C; D; F; OTHER			
NUMBER OF ENTRIES PERMITTED (circle one): ONE;	TWO; MULTIPLE; OT	HER		
PERIOD OF VALIDITY (circle one): ONE YEAR; TWO; F	TIVE; TEN; OTHER			
	F 11 "			
FOR OFFICE USE: Control #	Foil #			
LOSS/THEFT INFORMATION				
DATE PASSPORT WAS LOST/STOLEN: (Month)		/_		
(Month)	(Day)	(Year	.)	
PLACE PASSPORT WAS LOST/STOLEN:				
POLICE STATION AT WHICH INCIDENT WAS REPORT	ГЕD:			
DATE WHEN REPORTED TO POLICE:(Month)	(Day)	//(Yea	r)	
			SIGN	IATURE

NOTE: ALL SECTIONS, EXCEPT THE LINE <u>FOR OFFICE USE</u>, <u>MUST</u> BE COMPLETED BY APPLICANT.